BEST AVAILABLE COPY

PATENT APPLICATION FEE DETERMINATION RECOR								10036974 42922.00048					
CLAIMS AS EILED, DART I													
(Column 1)					(Column 2)				NTITY	OR	OTHER SMALL		
TOTAL CLAIMS			15				RA	TE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			/5 minus 20=		* 6		X\$ 9=			OR	X\$18=	ž	
INDEPENDENT CLAIMS			2 minus 3 =		* Ø		X42=			OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+140=			OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL	· ·		
CLAIMS AS AMENDED - PART II								OTHER THAN					
	(Column 1) (Column 2) (Column CLAIMS HIGHEST							ALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=.		OR	X\$18=		
A ME	Independent	*	Minus	***	*******	=	. X4	2=		OR	X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							0=.			+280=		
										OR	TOTAL		
								ADDIT. FEE OR ADDIT. FEE					
	(Column 1) (Column 2) CLAIMS HIGHEST					(Column 3)			ABBI			4001	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	OUSLY	PRESENT EXTRA	RA ⁻	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=	,	OR	X\$18=		
	Independent	*	Minus	***		=	X4:	2=	-	OR	X84=	•	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un			
								0= OTAL		OR	+280=		
										OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PÁID	BER OUSLY	PRESENT EXTRA	RA ⁻	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
ME	Independent	*	Minus	***		=-	X42	2=			X84=	···	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR			
	If the entry in eath	mn 1 is lose than t	an ontru in ant	umn ?i	3 "O" in an	lumo 3	+14			OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE		
		nber Previously Pa					found in t	he ap	propriate bo	x in co	lumn 1.		